BY ORDER OF THE COMMANDER FAIRCHILD AIR FORCE BASE

FAIRCHILD AIR FORCE BASE INSTRUCTION 48-100

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Aerospace Medicine

FOOD AND PUBLIC FACILITY INSPECTION



COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

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The purpose of this publication is to provide guidance for all Air Force food/public facilities and medical food and sanitation inspection offices in preventing food-borne illnesses on Fairchild Air Force Base (AFB). This instruction should be used with the most recent edition of the US Department of Health and Human Services, Food and Drug Administration (FDA) Food Code (with Air Force (AF) changes), Air Force Instruction (AFI) 48-116, *Food Safety Program*, AFI 48-117, *Public Facility Sanitation*. Please note this publication does not include the inspection or disposition of military rations. This instruction applies to all subordinate units of the 92d Air Refueling Wing (92 ARW). This publication does apply to the Air National Guard (ANG) or Air Force Reserve Command (AFRC).

Ensure that all records created as a result of processes prescribed in this publication are maintained in accordance with AFMAN 33-363, *Management of Records*, and disposed of in accordance with the Air Force Records Disposition Schedule (RDS). Refer recommended changes and questions about this publication to the Office of Primary Responsibility (OPR) using the AF Form 847, *Recommendation for Change of Publication*, and route the AF Form 847s from the field through the appropriate functional chain of command.

Chapter 1

RESPONSIBILITIES

1.1. Installation Commander:

- 1.1.1. Establishes an effective food/public safety program for Fairchild AFB and ensures compliance with the most recent copy of the FDA Food Code with Air Force changes, AFI 48-116, Food Safety Program, and AFI 48-117, Public Facility Sanitation.
- 1.1.2. Ensures receipt, shipment, and storage points are protected from intentional contamination as part of installation vulnerability assessments and response plans.
- 1.1.3. Oversees the overall operation and maintenance for Fairchild AFB facilities.

1.2. The Medical Treatment Facility (MTF) Commander:

- 1.2.1. Ensures that Fairchild AFB public facilities are evaluated for sanitation in compliance with AFI 48-117, Public Facility Sanitation.
- 1.2.2. Provides recommendations for the sanitary operation and maintenances of Fairchild AFB facilities, and ensures recommendations are given to the installation commander or other responsible persons.

1.3. Procurement/Contracting Offices:

1.3.1. Purchase all food from approved sources in collaboration with Public Health. Approved sources must comply with section 1.3.1.1. of AFI 48-116, *Food Safety Program*.

1.4. Facility Supervisors/Managers:

- 1.4.1. Ensure foods are procured from approved sources in collaboration with the Procurement/Contracting office and the Public Health Office.
- 1.4.2. Inspect potentially hazardous food upon receipt for wholesomeness, age at time of delivery, packaging integrity, source approval, and sanitary condition of delivery vehicles.
- 1.4.3. Ensure food handlers are trained on identifying unwholesome foods and their proper disposition.
- 1.4.4. Integrate food safety procedures into all aspects of food service operations in accordance with the most current copy of the FDA Food Code with Air Force Changes.
- 1.4.5. Conduct initial food safety and security training for all food handlers prior to employment, as well as formal, continuous, on-the-job training throughout their employment.
- 1.4.6. Assure employees are free of apparent health conditions that would preclude them from safely handling food.
- 1.4.7. Reject foods that are unfit for their intended purpose (i.e. retail sale due to low customer appeal) and that are unwholesome. Contact Public Health concerning wholesomeness issues.
- 1.4.8. Use integrated pest management procedures to control pests and to minimize the use of chemical pesticides.

- 1.4.9. Ensure food service equipment meets or exceeds National Sanitation Foundation standards.
- 1.4.10. Ensure all vending machines are approved by the National Sanitation Foundation, or meet National Automatic Merchandising Association standards. Ensure Public Health involvement when planning to install vending machines with potentially hazardous foods.

1.5. Aerospace Medicine Council (AMC):

- 1.5.1. Establishes the frequency of food/public facility sanitation inspections for Fairchild AFB, and for any locally-approved sources.
- 1.5.2. Establishes the frequency and procedures for assuring food safety on military aircraft that serve potentially hazardous foods.

1.6. Public Health:

- 1.6.1. Is the "regulatory authority" for the food safety program as prescribed in the most recent FDA Food Code with Air Force Changes.
- 1.6.2. Provides definitive medical recommendations on approved food sources to procurement offices.
- 1.6.3. Trains and provides consultative services to food facility managers concerning wholesomeness, condition, packaging integrity, source approval, sanitary condition of delivery vehicles, and proper storage of foods at delivery to ensure suitability for intended purposes. Conducts receipt inspections when requested by the facility mangers to prevent major financial losses to the government.
- 1.6.4. Provides annual food safety and security training for food service supervisors. Developed training must include the importance of following the most current FDA Food Code with Air Force changes to ensure the safe receipt, storage, preparation, and service of foods. Training should also highlight the unique aspects of a military population and the impact that food handling can have on readiness.
- 1.6.5. Investigates infested subsistence according to MIL STD 904, Guidelines for Detection, Evaluation, and Prevention of Pest Infestation of Subsistence.
- 1.6.6. Determines wholesomeness for foods exposed to refrigeration failure in accordance with the *Guide to the Salvage of Chilled/Frozen Foods Exposed to Refrigeration Failure*.
- 1.6.7. Rejects or condemns unfit or unwholesome foods. A Public Health Officer or a medical officer must sign the loss certificate if the loss exceeds \$1000 per incident. Qualified Public Health Technicians (Craftsman or higher) may sign certificate for losses not exceeding \$1000 per incident.
- 1.6.8. Maintains sanitation oversight for temporary food facilities associated with air show, festivals, and similar installation events.
- 1.6.9. Foods served/sold to the general public must not include home-processed wild game or other meats, or home-canned/home-jarred foods, or dairy products from unapproved sources. All foods served/sold must originate from government-inspected facilities.

Chapter 2

PROCEDURES

2.1. Food Facilities:

2.1.1. Ensure all supplies and reference materials needed to complete the inspection are available. Review the facility's binder for trends before accomplishing the inspection.

2.1.2. Items to inspect:

- 2.1.2.1. Ensure all items listed on the prescribed inspection forms listed in Attachment 1. are inspected and documented.
- 2.1.3. Ensure each documented discrepancy identifies the specific discrepancy, ensuring critical discrepancies are properly annotated. The discrepancy annotation shall include Public Health impact, and short or long-term preventive recommendations.
- 2.1.4. Ensure specific positive aspects of facility operations and employee food handling processes are properly documented on the AF Form 977, *Food Facility Evaluation* or the adapted Form FAIRCHILDAFB489.
- 2.1.5. Address any questions or concerns the manager or person in charge may have and have them sign the AF Form 977, *Food Facility Evaluation* or the adapted Form FAIRCHILDAFB489. Give the facility representative the original and place the copy in the facility binder.

2.2. Public Facilities:

- 2.2.1. Ensure all supplies and reference materials needed to complete the inspection are available, to include the appropriate facility checklist. Review the facility's binder for trends before accomplishing the inspection.
- 2.2.2. Conduct the facility inspection with the manager or designated person in charge.
- 2.2.3. Inspect the facility in accordance with AFI 48-117, *Public Facility Sanitation*. Document any repeat discrepancies noted from previous inspections.
- 2.2.4. Ensure all items listed on the prescribed inspection forms listed in section Attachment 1 are inspected and documented.
- 2.2.5. Ensure each documented discrepancy identifies the details of the specific discrepancy. The discrepancy annotation shall include Public Health impact, and short- or long-term preventive recommendations. The report should also include any positive aspects of the facility. Address any questions or concerns the manager or person in charge may have, and have them sign the AF Form 2519, *All Purpose Checklist* or the adapted electronic Form FAIRCHILDAFB484. Give the facility representative the original and place the copy in the facility binder.

2.3. Child Development Center (CDC):

2.3.1. Ensure all supplies and reference materials needed to complete the inspection are available, to include the "Caring for Our Children" book. Make certain you have the AF Form 2519, CDC Public Facility Checklist, or the adapted electronic Form

- FAIRCHILDAFB486 and review the facility's binder for trends before accomplishing the inspection.
- 2.3.2. Once at the facility, notify the manager or designated person in charge that you are about to conduct a sanitation inspection. Inspect 10% of both the employees' and children's shot records. Ensure employee health certificates are up to date. Notify the CDC Director if any employee's medical certificate is expired. If any employee or child immunizations are not current, notify the CDC Director immediately. Inform the director that employees and children cannot be present in the CDC until their immunizations are up-to-date.
- 2.3.3. Inspect the facility in accordance with AFI 48-117, *Public Facility Sanitation*, and AFI 34-248, *Child Development Centers*. Pay close attention to any repeat discrepancies noted from previous inspections.
- 2.3.4. Document the inspection on the AF Form 2519, *CDC Public Facility Checklist*, or the adapted electronic Form FAIRCHILDAFB486. This form must be completely filled out. The given rating must be consistent with what was noted throughout the report. Discuss all discrepancies and write-ups with the facility manager or person in charge. Address any questions or concerns and leave the original AF Form 2519, *CDC Public Facility Checklist*, or the adapted electronic Form FAIRCHILDAFB486 with them, and place a copy in the facility binder.
- **2.4. When unfitness is found during an inspection:** Use the following forms as certificates for unfitness:
 - 2.4.1. For AAFES (Army and Air Force Exchange Services): AF Form 3516, *Food Service Inventory Transfer*.
 - 2.4.2. For DeCA: DeCA Form 70-51, Tally In/Tally Out Sheet.
 - 2.4.3. For other government-owned food: DD Form 708, Salvage Operations.
 - 2.4.4. Inspect base food/public facilities to verify compliance with the most recent FDA Food Code with Air Force changes, AFI 48-116, *Food Safety Program*, and AFI 48-117, *Public Facility Sanitation*. Document inspection results on the following prescribed forms:
 - 2.4.5. Food Facility inspections are to be documented using the AF Form 977, *Food Facility Evaluation*, or the adapted electronic Form FAIRCHILDAFB489.
 - 2.4.6. Public Facility inspections are to be documented using the AF Form 2519, *All Purpose Checklist*, or the adapted electronic Form FAIRCHILDAFB484.
 - 2.4.7. DeCA inspections are to be documented using the locally-developed Commissary Inspection Checklist, or the adapted electronic Form FAIRCHILDAFB487.
 - 2.4.8. Family Home Daycare (FCC) inspections are to be documented using the AF FCC Health Inspection, Initial, Renewal, Annual unannounced Comprehensive and Multidisciplinary Team Inspection or the adapted electronic Form FAIRCHILDAFB480.
 - 2.4.9. Report nonconforming medical food inspections results on DD Form 1232, *Quality Assurance Representatives Correspondence*. Annotate the form with the "the food items listed are unfit for human consumption" or "unfit for intended use." Clearly state the details regarding the unfit conditions. For DeCA (Defense Commissary Agency), annotate nonconforming results on DeCA Form 10-21, *Product Inspection Report*.

Chapter 3

RATINGS

3.1. Food Facilities:

- 3.1.1. An Excellent rating is given when the level of sanitation is above and beyond the expected standard.
- 3.1.2. A Satisfactory rating is given when only minor discrepancies are noted during the inspection.
- 3.1.3. A Marginal rating is given when the facility shows a downward trend in food safety and sanitation practices. Any facility with a marginal rating will be re-inspected within 5 days.
- 3.1.4. An unsatisfactory rating is given when the facility receives discrepancies that are listed in the most recent FDA Food Code with Air Force changes. Any facility with an unsatisfactory rating will be re-inspected within 24 hours.
- 3.1.5. Send unsatisfactory ratings to the Aeromedical commander (or equivalent) and to the Medical Group Commander. Determine locally whether reports warrant attention above the medical commander. However, the Mission Support Group Commander must be informed of chronic and repeat discrepancies, and the Wing Commander must be aware of issues that could impact the mission.
- 3.1.6. Send unsatisfactory reports on contractor-operated, AAFES, or DeCA facilities to the contracting authority, HQ AAFES, or HQ DeCA, respectively.

3.2. Public Facilities:

- 3.2.1. If the facility received an unsatisfactory rating, a re-inspection must be accomplished within 24 hours. If the facility received a marginal rating, then a re-inspection must be accomplished within 5 days. Discuss all discrepancies and write-ups with the facility manager or person in charge.
- 3.2.2. Send unsatisfactory ratings to the Aeromedical commander (or equivalent) and to the Medical Group Commander. Determine locally whether reports warrant attention above the Medical Group Commander. However, the Mission Support Group Commander must be informed of chronic and repeat discrepancies, and the Wing Commander must be aware of issues that could impact the mission.

BRIAN M. NEWBERRY, Colonel, USAF Commander

Attachment 1

GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

References

AFI 48-116, Food Safety Program, 17 March 2004

AFI 48-117, Public Facility Sanitation, 6 May 1994

AFI 34-248, Child Development Centers, 1 October 1999

AFI 34-276, Family Child Care Programs, 1 November 1999

DeCA Directive 40-5, Grocery Department Operations, 21 November 2008

DeCA Directive 40-3, Meat Department Operations, 27 March 2013

DeCA Directive 40-4, Produce Department Operations, 1 July 1999

DODI 6060.2, Child Development Programs

DSCP Handbook 4155.2, Inspection of Composite Operational Rations,

FDA Food Code (with most recent changes)

Guide to the Salvage of Chilled/Frozen Foods Exposed to Refrigeration Failure,

MIL STD 904, Guidelines for Detection, Evaluation, and Prevention of Pest Infestation of Subsistence

Prescribed Forms

FAIRCHILDAFB480, Air Force Family Child Care (FCC) Home Health Inspection

FAIRCHILDAFB481, Barber and Beauty Shop Checklist

FAIRCHILDAFB482, Swimming Pool Evaluation

FAIRCHILDAFB483, Nail Salon Evaluation Checklist

FAIRCHILDAFB484, Public Facility Inspection for Fitness Center/Indoor Pool

FAIRCHILDAFB485, Youth Center Inspection Checklist

FAIRCHILDAFB486, CDC Inspection Checklist

FAIRCHILDAFB487, Commissary Inspection Checklist

FAIRCHILDAFB488, Miscellaneous Inspection Checklist

FAIRCHILDAFB489, Food Facility Evaluation

FMP FCC 33- FEB 2007, AF FCC Health Inspection- Initial, Renewal, Annual Unannounced Comprehensive and Multidisciplinary Team Inspection

Adopted Forms

AF Form 847, Recommendation for Change of Publication

AF Form 2519, All Purpose Checklist

AF Form 3516, Food Service Inventory Transfer

AF Form IMT 977, 19940501, V2, Food Facility Evaluation

DD Form 1232, Quality Assurance Representatives Correspondence

DD Form 708, Salvage Operations

DeCA Form 10-21, Product Inspection Report

DeCA Form 70-51, Tally In/Tally Out Sheet

Abbreviations and Acronyms

AAFES—Army and Air Force Exchange Services

AF—Air Force

AFB—Air Force Base

AFI—Air Force Instruction

AFRC—Armed Forces Reserve Command

AMC—Aerospace Medicine Council

ANG—Air National Guard

ARW—Air Refueling Wing

CDC—Child Development Center

DeCA—Defense Commissary Agency

FCC—Family Home Daycare

FDA—Food and Drug Administration

MTF—Medical Treatment Facility

OPR—Office of Primary Responsibility

RDS—Records Disposition Schedule